

TESTIMONY TO THE DEPARTMENT OF PUBLIC HEALTH
REGARDING PROPOSED

***H.B. No. 5499 (RAISED) AN ACT CONCERNING REGULATIONS
RELATING TO HOSPICE CARE**

March 16, 2012

Dr. Mullen and members of the Department of Public Health., my name is Dianne Welch and I am Director of Hospice at Visiting Nurse & Health Services of Connecticut in Vernon. As a long standing and well respected home health and hospice provider, we would like to express our support of the proposed revisions to the Hospice Facility Regulations H.B. No. 5499. We believe these revisions will bring Hospice care in Connecticut in line with National practices and provide access to quality inpatient care.

Currently, the majority of Hospice patients in Connecticut have access to the inpatient level of care that is **contracted** through either a nursing facility or acute care hospital and the local Hospice agency. Although the Hospice is responsible for the plan of care for these patients, the actual 24 hour care is provided by the hospital or SNF staff that has had some education but may not be of the Hospice philosophy. Very often these staff members are also caring for non-Hospice patients and find it hard to do both effectively. In the contracted setting the Hospice agency may not have control over the environment to create the atmosphere that they desire to have their patients and families experience. With extremely short inpatient stays at end of life, the family may not even realize the extent of Hospice involvement with their loved one. We believe each Hospice agency should have the option to create and operate an inpatient facility where our patients could have access to an increased level of the true Hospice experience. By creating our own environment and providing our own full complement of dedicated Hospice staff, our patients and families will experience an increased quality of Hospice inpatient care. We believe that patients and families in Connecticut have a right to receive this standard of Hospice care in the communities in which they reside. Presently this option is only

available to a limited number of patients and families, as relocating or driving long distances is not a desirable option to most.

The proposed revisions will also help modernize hospice care and services in the state of Connecticut. They will comply with both the Connecticut home health agency regulations and with the Medicare Conditions of Participation (CoPs). Therefore, compliance with all of these state and federal regulations will ensure appropriate, safe care for hospice patients in this setting. Concerns about the proposed revisions have been addressed by the members of CAHCH with recommendations put forth.

In summary, we at Visiting Nurse and Health Services of Connecticut see this as an opportunity to give all Hospice patients and families in Connecticut equal access to the full Hospice inpatient experience by giving Hospice agencies the option to operate facilities under these revisions. We therefore strongly urge you to support and approve them and thank you for your time and consideration of this important Hospice issue.

Please feel free to contact me if you have questions.

Respectfully submitted,

Dianne Welch, RN,MSN

Director of Hospice

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